

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. 10633659	FILING DATE				
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP
1	1						51				
2	1						52				
3	1						53				
4	1						54				
5		4					55				
6		4					56				
7	1						57				
8		1					58				
9							59				
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43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	5						TOTAL IND.				
TOTAL DEP.	29						TOTAL DEP.				
TOTAL CLAIMS	28						TOTAL CLAIMS				